



Bib Data Sheet


**UNITED STATES DEPARTMENT OF COMMERCE**  
**Patent and Trademark Office**

 Address: COMMISSIONER OF PATENTS AND TRADEMARKS  
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<b>SERIAL NUMBER</b> 09/590,613	<b>FILING DATE</b> 06/08/2000 <b>RULE</b> -	<b>CLASS</b> 704	<b>GROUP ART UNIT</b> 1741	<b>ATTORNEY DOCKET NO.</b> TI-29099
<b>APPLICANTS</b> Yu-Hung Kao, Plano, TX ;				
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/144,216 07/19/1999 <i>Verified MPA</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>None MPA</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 08/04/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>Now</i> Examiner's Signature Initials <i>MPA</i>		<b>STATE OR COUNTRY</b> TX	<b>SHEETS DRAWING</b> 1	<b>TOTAL CLAIMS</b> 14
				<b>INDEPENDENT CLAIMS</b> 5
<b>ADDRESS</b>  23494				
<b>TITLE</b> Method of generating a compact text-to-phone pronunciation dictionary				
<b>FILING FEE RECEIVED</b> 846	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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2004-0163

CONFIRMATION NO. 1311

SERIAL NUMBER 09/590,613	FILING DATE 06/08/2000  RULE	CLASS 704	GROUP ART UNIT 2654	ATTORNEY DOCKET NO. TI-29099
APPLICANTS  Yu-Hung Kao, Plano, TX;				
** CONTINUING DATA ***** This appln claims benefit of 60/144,216 07/19/1999				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/04/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged		STATE OR COUNTRY TX	SHEETS DRAWING 1	TOTAL CLAIMS 14  INDEPENDENT CLAIMS 5
ADDRESS 23494 TEXAS INSTRUMENTS INCORPORATED P O BOX 655474, M/S 3999 DALLAS , TX 75265				
TITLE COMPACT TEXT-TO-PHONE PRONUNCIATION DICTIONARY				
FILING FEE  RECEIVED 846	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____	